

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Feb 03 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P24084 (6)
1. Corporation Name
HARRIS-SL CORP.



Principal Place of Business
2 NORTH LASALLE STREET
SUITE 400
CHICAGO IL 60602
US

Mailing Address
2 NORTH LASALLE STREET
SUITE 400
CHICAGO IL 60602
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified	4. FEI Number	Applied For
21	26	04/26/1989	36-3640221	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired	\$8.75 Additional Fee Required	
22	27	<input type="checkbox"/>		
City & State	City & State	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
23	28	<input type="checkbox"/>		
Zip	Country	29	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
24	25	30		

9. Name and Address of Current Registered Agent

THE PRENTICE HALL CORPORATION SYSTEM, INC.
110 N. MAGNOLIA STREET
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	P	DELETE
NAME	MARTIN, PETER E.	
STREET ADDRESS	2 N LASALLE ST, SUITE 400	
CITY-ST-ZIP	CHICAGO IL	
TITLE	V	DELETE
NAME	PETERMAN, FREDERICK	
STREET ADDRESS	2 N LASALLE STREE 400	
CITY-ST-ZIP	CHICAGO IL	
TITLE	VD	DELETE
NAME	POLSKY, JACK R.	
STREET ADDRESS	2 N LASALLE ST., SUITE 400	
CITY-ST-ZIP	CHICAGO IL	
TITLE	T	DELETE
NAME	NEUMAYER, GARY	
STREET ADDRESS	2 NORTH LASALLE ST 400	
CITY-ST-ZIP	CHICAGO IL	
TITLE	D	DELETE
NAME	KAHN, JEROME, JR.	
STREET ADDRESS	2 N LASALLE ST 400	
CITY-ST-ZIP	CHICAGO IL	
TITLE	CD	DELETE
NAME	HARRIS, IRVING B.	
STREET ADDRESS	2 NORTH LASALLE ST 400	
CITY-ST-ZIP	CHICAGO IL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Secretary	Change	Addition
1.2 NAME	Patricia L. Miller		
1.3 STREET ADDRESS	2 N. LaSalle St., Suite #400		
1.4 CITY-ST-ZIP	Chicago, IL		
2.1 TITLE		Change	Addition
2.2 NAME			
2.3 STREET ADDRESS			
2.4 CITY-ST-ZIP			
3.1 TITLE		Change	Addition
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP			
4.1 TITLE		Change	Addition
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP			
5.1 TITLE		Change	Addition
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE		Change	Addition
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY-ST-ZIP			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 or on an attachment with an address.

SIGNATURE _____ Gary J. Neumayer, Treasurer 1/13/98 312-62130590

CR2E034 (10/97)